

Application Form

To sit the Patent Agent Examinations

**Application is hereby made to sit the law and practice of patents examination
under Rule 8(1) of the Register of Patent Agent Rules, 2015**

Name:	
Private Address:	
Nationality:	
Date of Birth:	
Telephone No:	
Email Address:	
Special Requirements:	

**Fee payable under Item SCH2-2 of the Patents and Trade Marks (Fees) Rules 2012
(as amended)**

On application for Law & Practice of Patents Examination	€200.00
--	---------

Method of Payment

Tick only one box

Credit Card (please ring Office directly
to make payment)

Electronic Funds Transfer

If you want to pay by Electronic Funds Transfer, our bank account details are as follows:

A/C Number:	80012459
Sort Code:	951990
IBAN:	IE94DABA95199080012459
BIC:	DABAIE2D

Signature

Signature of Applicant:	
Date:	